Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVS354AGC	A. BUILDING _____ B. WING _____	09/10/2008

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SACHELE SENIOR GUEST HOME	3398 BANCROFT CIRCLE LAS VEGAS, NV 89121

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 9/10/08. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for six Residential Facility for Group beds for elderly and disabled persons and/or persons with mental illnesses, one Category I resident and five Category II residents. The census at the time of the survey was five. Five resident files were reviewed and three employee files were reviewed. One discharged resident file was reviewed. The following deficiencies were identified:	Y 000		
Y 151 SS=C	449.204(1)(b) Insurance NAC 449.204 1. A residential facility shall: (b) Maintain a contract of insurance for protection against liability to third persons in amounts appropriate for the protection of residents, employees, volunteers and visitors to the facility. This Regulation is not met as evidenced by: Based on record review on 9/10/08, the administrator did not maintain a contract of insurance for protection against liability to third persons. Findings include: There was no current liability insurance policy in	Y 151		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 151	Continued From page 1 the facility. Severity: 1 Scope: 3	Y 151		
Y 272 SS=C	449.2175(3) Service of Food - Menus NAC 449.2175 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90 days. This Regulation is not met as evidenced by: Based on record review and interview on 9/10/08, the facility did not date or keep menus on file for 90 days. Findings include: The facility's posted menu was not dated and previous menus were not kept on file. Employee #3 stated that the facility did not keep a record of its menus. Severity: 1 Scope: 3	Y 272		
Y 353 SS=E	449.222(3) Bathrooms and Toilet Facilities NAC 449.222 3. The bottoms of tubs and showers must have surfaces that inhibit falling and slipping. Cabinets that are attached to the floor or grab bars must be adjacent to the tubs, toilets and showers. This Regulation is not met as evidenced by: Based on observation on 9/10/08, the facility did not ensure grab bars were adjacent to the toilets	Y 353		

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Y 353	Continued From page 2 in 1 of 2 bathrooms. Findings include: A tour of the facility revealed there was no grab bar for the toilet in the east bathroom. Severity: 2 Scope: 2	Y 353		
Y 878 SS=F	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Based on record review and staff interview on 9/10/08, the facility did not ensure that medications were administered to 4 of 5 residents as prescribed. Findings include: Resident #1 - The September 2008 medication administration record (MAR) was reviewed for the resident. The MAR indicated the resident received two tablets of Senna twice a day in	Y 878		

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Y 878	Continued From page 3 September and in August. The Senna medication on site, filled on 7/31/08, indicated three tablets were to be administered twice a day. There had been no change to the MAR in July and a physician's order was not in the file. Resident #3 - The September 2008 MAR was reviewed for the resident. The label on the bottle of Lorazepam indicated that 1.0 mg was to be taken every eight hours and every two hours as needed (PRN); however, the MAR did not reflect the PRN portion of the prescription. Resident #4 - The September 2008 MAR was reviewed. The MAR indicated that Temazepam was to be given at 8:00PM; on 9/10/08, however, Employee #3, initialed that it had been given to the resident in the morning. Resident #5 - The September 2008 MAR was reviewed. Lisinopril was listed on the MAR but had not been initialed by the caregiver for the month of September. Employee #3 stated that she had given Lisinopril to the resident daily but had not recorded that she had done so on the MAR. Severity: 2 Scope: 3	Y 878		
Y 885 SS=D	449.2742(9) Medication / Destruction NAC 449.2742 9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the	Y 885		

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Y 885	Continued From page 4 medication in the record maintained pursuant to NAC 449.2744. Flushing contents of vials, bottles or other containers into a toilet shall be deemed to be an acceptable method of destruction of medication. This Regulation is not met as evidenced by: Based on record review and observation on 9/10/08, the facility did not discard medications for 1 of 5 residents after the expiration date. Findings include: Resident #4's medications were reviewed. Her box contained a bottle of Morphine that expired in June of 2008. The medication administration record (MAR) indicated the resident had not received the medication since its expiration date. Severity: 2 Scope: 1	Y 885		
Y 921 SS=D	449.2748(2) Medication Storage NAC 449.2748 2. Medication stored in a refrigerator, including, without limitation, any over-the-counter medication, must be kept in a locked box unless the refrigerator is locked or is located in a locked room. This Regulation is not met as evidenced by: Based on observation on 9/10/08, the facility did not ensure medication stored in the refrigerator was kept in a locked box.	Y 921		

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Y 921	Continued From page 5 Findings include: A tour of the kitchen revealed that the medication box in the refrigerator was not locked. The box contained multiple bottles of medications belonging to residents. Severity: 2 Scope: 1	Y 921		
YA908 SS=A	449.2746(2)(a-f)PRN Medication Record NAC 449.2746 2. A caregiver who administers medication to a resident as needed shall record the following information concerning the administration of the medication: (a) The reason for the administration; (b) The date and time of the administration; (c) The dose administered; (d) The results of the administration of the medication; (e) The initials of the caregiver; and (f) Instructions for administering the medication to the resident that reflect each current order or prescription of the resident's physician. This Regulation is not met as evidenced by: Based on review of the medication administration record (MAR) on 9/10/08, the facility did not ensure that documentation for as needed (PRN) medications was complete for 1 of 5 residents.	YA908		

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YA908	Continued From page 6 Finding include: Resident #5 - The September 2008 medication administration record (MAR) was reviewed for the resident. The MAR indicated the resident was receiving Fluticasone Propionate nasal spray PRN. Employee #1 stated that the resident needed the spray 2-3 times daily, but the MAR did not contain documentation regarding the reason for the administration, the time of the administration, and the results of the administration. Severity: 1 Scope: 1	YA908		